

COMBINED DECLARATION AND POWER OF ATTORNEY

As a below named inventor(s), I(We) hereby declare that:

This declaration is of the following type:

- ☒ original
- ☐ design
- ☐ supplemental

NOTE: If the declaration is for an International Application being filed as a divisional, continuation or continuation-in-part application do not check next item; check appropriate one of last three items.

- ☐ national stage of PCT

NOTE: If one of the following three items applies, then check and also complete section entitled "CLAIM FOR BENEFIT UNDER 35 U.S.C. § 120."

- ☐ divisional
- ☐ continuation
- ☐ continuation-in-part (CIP)

My residence, post office address and citizenship are as stated below next to my name.

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

**ADJUSTABLE SENSITIVITY, GENETIC MOLECULAR INTERACTION  
SYSTEMS, INCLUDING PROTEIN-PROTEIN INTERACTION SYSTEMS  
FOR DETECTION AND ANALYSIS**

the specification of which (check one)

☐ is attached hereto.

☒ was filed on October 6, 2000, as Application Serial No. 09/680,738.

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment referred to above.

I acknowledge the duty to disclose information which is material to the examination of this application in accordance with Title 37, Code of Federal Regulations, Section 1.56 (a).

## CLAIM FOR BENEFIT UNDER 35 U.S.C. § 119

I hereby claim foreign priority benefits under Title 35, United States Code, Section 119 of any foreign application(s) for patent or inventor's certificate listed below and have also identified below any foreign application for patent or inventor's certificate having a filing date before that of the application to which priority is claimed:

### PRIOR FOREIGN APPLICATION(S)

	Priority Claimed	
_____ (Number) (Country) (Day/month/year filed)	<input type="checkbox"/> Yes	<input type="checkbox"/> No
_____ (Number) (Country) (Day/month/year filed)	<input type="checkbox"/> Yes	<input type="checkbox"/> No
_____ (Number) (Country) (Day/month/year filed)	<input type="checkbox"/> Yes	<input type="checkbox"/> No

## CLAIM FOR BENEFIT UNDER 35 U.S.C. § 119(e)

I hereby claim the benefit under Title 35, United States Code, Section 119(e) of any United States provisional application(s) listed below:

### PRIOR PROVISIONAL APPLICATIONS

	Filing Date
<u>60/158,079</u> (Number)	<u>October 7, 1999</u>
_____ (Number)	_____
_____ (Number)	_____

## CLAIM FOR BENEFIT UNDER 35 U.S.C. § 120

I hereby claim the benefit under Title 35, United States Code, Section 120 of any United States application(s) listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States application in the manner provided by the first paragraph of Title 35, United States Code, Section 112, I acknowledge the duty to disclose information which is material to patentability, as defined in Title 37, Code of Federal Regulations, Section 1.56 (a) which occurred between the filing date of the prior application and the national or PCT international filing date of this application:

### PRIOR US PATENT APPLICATIONS

_____ USSN	_____ Filing Date	_____ Status
_____ USSN	_____ Filing Date	_____ Status
_____ USSN	_____ Filing Date	_____ Status

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

POWER OF ATTORNEY: As named inventor, or named inventors, I (We) hereby appoint the attorney(s) and/or agent(s) presently listed in our Customer Nos. 24,118 (Tulsa), 24,951 (Arkansas) and 24,950 (Oklahoma City) all members duly authorized to practice law. Further, all foregoing attorneys are authorized to prosecute this application to register, to transact all business in the Patent and Trademark Office in connection therewith, and to receive the Letters Patent Document, if issued.

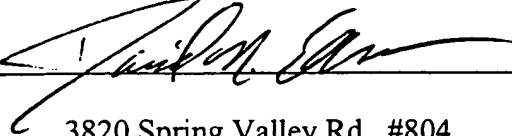
### SEND CORRESPONDENCE AND TELEPHONE CALLS TO:

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(405)236-4010 fax

Customer No. 24,950

Full name of sole or first inventor: **David N. Edwards**

Inventor's signature: \_\_\_\_\_



2-7-2001

DATE

Residence and  
Post Office Address:

3820 Spring Valley Rd., #804  
Addison, TX 75001

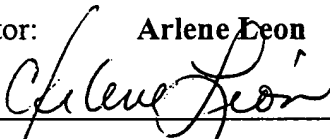
Citizenship:

UNITED STATES OF AMERICA

Full name of second inventor:

**Arlene Leon**

Inventors signature: \_\_\_\_\_



2-7-2001

DATE

Residence and  
Post Office Address:

2922 Periwinkle Court  
Garland, TX 75204

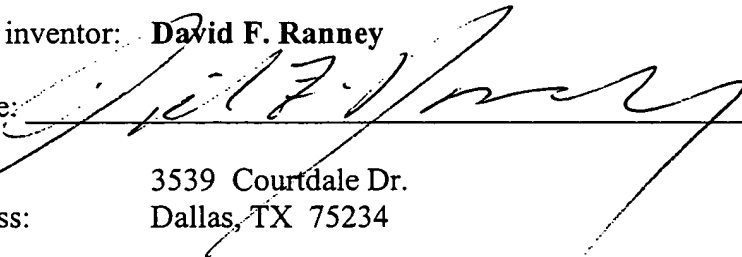
Citizenship:

UNITED STATES OF AMERICA

Full name of third inventor:

**David F. Ranney**

Inventors signature: \_\_\_\_\_



2-8-2001

DATE

Residence and  
Post Office Address:

3539 Courtdale Dr.  
Dallas, TX 75234

Citizenship:

UNITED STATES OF AMERICA

## IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant : Edwards et al.  
Serial No. : 09/680,738  
Filed : October 6, 2000 Group Art Unit: 1636  
For : ADJUSTABLE SENSITIVITY, GENETIC MOLECULAR  
INTERACTION SYSTEMS, INCLUDING PROTEIN-PROTEIN  
INTERACTION SYSTEMS FOR DETECTION AND  
ANALYSIS

SUBMISSION OF REVOCATION OF POWER OF ATTORNEY OR  
AUTHORIZATION OF AGENT

I hereby certify that this paper is being deposited with the  
United States Postal Service as first class mail in an envelope  
addressed to: Assistant Commissioner for Patents, Washington,  
D.C. 20231 on August 31, 2001.

<u>Rochelle K. Seide</u>	<u>32,300</u>
Attorney Name	Registration No.
	<u>August 31, 2001</u>
Signature	Date of Signature

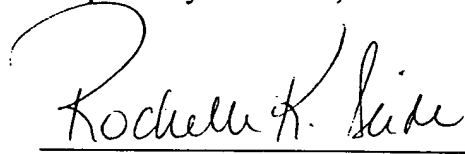
Assistant Commissioner for Patents  
Washington, D.C. 20231

Sir:

Applicants submit herewith for the above-identified application a  
Revocation and Power of Attorney or Authorization of Agent Under 37 C.F.R. §3.73(b).  
Applicants respectfully request that the newly appointed attorneys be made of record.

Applicants believe that no fee is required in connection with this communication. However, if a fee is required, the Commissioner is hereby authorized to charge the fee to Deposit Account 02-4377. A duplicate of this sheet is enclosed.

Respectfully submitted,

A handwritten signature in cursive script, reading "Rochelle K. Seide", written over a horizontal line.

Rochelle K. Seide  
Patent Office Reg. No. 32,300

Attorney for Applicants  
212-408-2500

Baker Botts LLP  
30 Rockefeller Plaza  
New York NY 10112